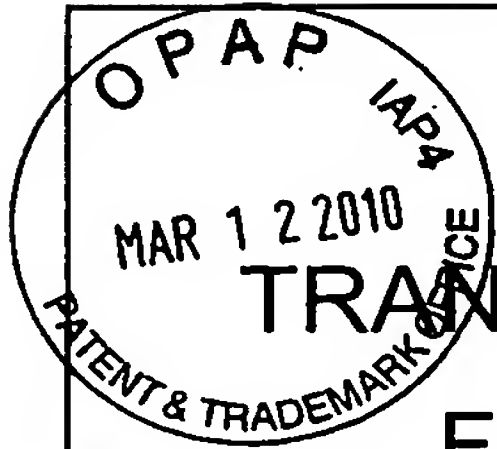


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/588,745	
Confirmation Number	4462	
Filing Date	with an effective filing date of February 4, 2005	
First Named Inventor	Jürgen LEGNER	
Group Art Unit	3661	
Examiner Name	Peter D. NOLAN	Fax: (571) 273-8300
Total No. of Pages in this Submission: 24	Attorney Docket Number	ZAHFRI P877US

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form . . . . . <input type="checkbox"/> (in Duplicate)  <input type="checkbox"/> Fee attached - Check \$  <input checked="" type="checkbox"/> Amendment/Response . . . . . [13]  <input checked="" type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request . . . . . <input type="checkbox"/> (in Duplicate)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Stmt . . . . . <input type="checkbox"/>  <input type="checkbox"/> Certified Copy of Priority . . . . . <input type="checkbox"/> Document(s)  <input type="checkbox"/> Response to Missing Part/s Incomplete Application . . . . . <input type="checkbox"/>  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers . . . . . <input type="checkbox"/> (for an Application)  <input checked="" type="checkbox"/> Drawing(s) --Annotated Sheet(s) . . . [1] Replacement Sheet(s) . . . [1]  <input type="checkbox"/> Licensing-related Papers . . . . . <input type="checkbox"/>  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful)  <input type="checkbox"/> To Convert a Provisional Petition . . . <input type="checkbox"/>  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address . <input type="checkbox"/>  <input type="checkbox"/> Terminal Disclaimer . . . . . <input type="checkbox"/>  <input type="checkbox"/> Small Entity Statement . . . . . <input type="checkbox"/>  <input type="checkbox"/> Request for Refund . . . . . <input type="checkbox"/>	<input type="checkbox"/> After Allowance Communication to Group . . . . . <input type="checkbox"/>  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences . . . <input type="checkbox"/>  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/>  <input type="checkbox"/> Proprietary Information . . . . . <input type="checkbox"/>  <input type="checkbox"/> Status Letter . . . . . <input type="checkbox"/>  <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):  EP 1714046 B1. . . . . [8]  Postcard
--	--	---

## REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Jay S. Franklin DAVIS & BUJOLD, P.L.L.C.	Reg. No. 54,105 CUSTOMER NO. 020210
Signature		
Date	March 8, 2010	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on March 8, 2010.

Signature		Date: March 8, 2010 (tac)
-----------	--	---------------------------